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SPECIALIZING IN HEALTH AND FITNESS

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September 17, 1983

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Dear [REDACTED]

As you know, plastic surgery can represent, for the patient, a truly extraordinary opportunity to experience far-reaching changes in self-image, basic life attitudes, and openness to the good that life can bring through positive interaction with other people.

As renowned plastic surgeon Maxwell Maltz has pointed out, however, these changes are ones that must occur at the subconscious level in order to be meaningful and even the most artistically skillful operation may not bring them about— or accomplish what is really possible. (Sometimes, indeed, the psychological impact may even be counterproductive, and on occasion the surgeon may even be held legally at fault for this purely psychological outcome for which he was not— operationally— responsible.)

If you are like other plastic surgeons, you may deal with this situation in several ways. One is to screen out patients who seem likely to be troublesome. Another is through fairly intensive personal counseling by the physician, designed to remove unrealistic expectations about the outcome of surgery, and to build confidence in what can realistically be accomplished.

These efforts are certainly needed. A dissatisfied patient is not what your skills and dedication are designed or intended to produce. Second, each such patient can have a costly negative ripple-out effect through word of mouth. Most people have no rational, informed method of decision-making about such professional areas as plastic surgery. A good reputation and positive "word of mouth advertising" are crucial to any successful practice. Third, dissatisfied patients— however irrational or unjustified their allegations— can become the instigators of litigation.

As Dr. Maltz points out in his famous work, Psycho-Cybernetics, however, such efforts, all too often, are not enough. The real problem lies in the patient's self-image at the subconscious level. Even the most experienced physician, psychiatrist or psychologist does not really consciously know, as a rule, what is actually going on at these levels for himself, let alone for his patients. And, of course, the patients usually know even less, consciously, about their real problems and real needs.

At the subconscious level, however, patients— not psychologists, psychiatrists or physicians— have perfect information about themselves on

these matters. The challenge is therefore two-fold: First, to get this information out, up to conscious decision-making levels. Second, when consciously needed and desired, to change or "reprogram" any undesirable, counter-productive or dysfunctional subconscious elements.

The authors of this letter are psychologists specializing in health, fitness, self-image and personal success. We work with accelerated methods of subconscious accessing and direct reprogramming of the subconscious that represent as great an advance over Dr. Maltz' methodology as his did over those that preceded. Our approach is called Response Therapy. Its methods are, we believe, ideally suited to do two extremely important things, swiftly and effectively, for plastic surgeons and their patients:

(I) Provide pre-operative subconscious profiles of (a) the patient's self-image, both physical and otherwise; (b) the patient's expectations of the results of the operation; and (c) his or her readiness and willingness to experience (1) the operation itself, and (2) the anticipated benefits of the expected changes in appearance or well-being.

Based on the Pre-Op Profile, we will enable the patient to make any indicated changes in subconscious programming in order to complete readiness for a highly positive experience both during and after surgery.

(II) Provide post-operative subconscious profiles of (a) the patient's self-image, including physical as well as other major aspects; (b) the patient's appraisal of the operation's results; and (c) his or her willingness and ability to pursue a constructive and enjoyable life as a consequence.

In the event we find negative or disabling or unnecessarily limiting elements in these subconscious Post-Op Profiles, we will enable the patient to make the indicated changes, rapidly and easily, so the operation will be viewed (at the patient's crucial, motivational and affective subconscious level) as a complete success.

This work can be done in your own offices, provided you have a small room, comfortably furnished, that can be scheduled for these purposes, or at the hospital in a similar setting. Otherwise, it can be done at one of the clinics we are associated with in Smyrna, Buckhead or downtown Atlanta.

As a plastic surgeon, you have learned how to make remarkably beneficial changes in people's physical bodies and appearance in what may appear to the layman as an unbelievably brief time. So, too, have we learned how to do the same thing in regard to their minds.

We look forward to the opportunity to discuss this with you at your early convenience. We will be happy to demonstrate our methods with you or anyone you choose as a subject. If our past experience is any guide, you will find them both fascinating and impressive.

If you wish prior references on these methods, please consult Clinical Hypnotherapy by David Cheek, M.D., gynecologist, and clinical psychologist Leslie LeCron. (This remarkable volume describes the subconscious accessing method, done in a completely conscious state, that we use. We are presently writing our own book on our reprogramming methods, along with numerous case studies.)

We will call you in several days to arrange an appointment. If you are interested, please ask your appointment secretary to prepare alternative convenient dates.

Sincerely,

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# U.S. must boldly tackle problems in Central America, Nixon says

United Press International

WASHINGTON — The United States must boldly address the economic and social problems of Central America, Richard Nixon said Wednesday, noting, "Too often, we just talk about the communists."

The former president, making his first appearance before a government body since he resigned in 1974, testified for more than two hours in a closed session of the National Bipartisan Commission on Central America.

The group, named by President Reagan, is headed by Henry Kissinger, who served as Nixon's national security adviser and secretary of state.

The commission, which previously heard from former presidents Gerald Ford and Jimmy Carter, was set up to study the problems of Central America and make recommendations for long-term U.S. policy in the region.

Summing up his testimony for reporters after the session at the State Department, Nixon said his main point was that the people of Latin America have "enormous problems."

"The communists talk about the problems. Too often, we just talk about the communists," he said.

"What we have to do now is to address the problems in Latin America as well as the communist threat."

Nixon compared the Kissinger commission, in terms of significance, to the advisory group that carried out the Marshall Plan for economic recovery in Europe after World War II.

"This commission could be presenting to the American people one of the most important reports and recommendations since the Marshall Plan recommendations were made 30 years ago," he said.

Nixon said he made three points:

- There should be a long-term program, at least 10 years, for the entire region.

- The recommendations should be bipartisan, not just in terms of party "but, to the extent possible, between liberals and conservatives."

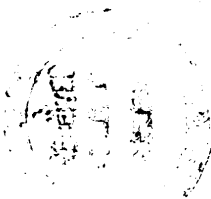
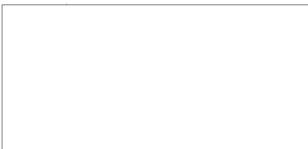
- The program should be bold.

"The problem in Latin America is not economic recovery," he said. "The problem is getting started."

Nixon was asked how he felt about testifying as a former president who had to resign in disgrace.

"I think in terms of foreign policy, there's been a general understanding in this country . . . a former president may have some experience worth sharing."

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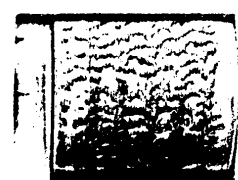
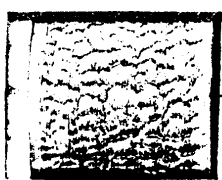


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Mr. William J. Casey  
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